



2019 SPRING LEAGUE REGISTRATION FORM

Advanced Play League 11 & 12 Year Olds

Cal Ripken Baseball - Myers Park

Players who do not make this league are encouraged to register for the Little Major League program at either Capital, Meridian, or Winthrop Parks on January 16, 5:30-7pm. Players may only register in one PRNA endorsed baseball program during this season.

REGISTRATION DATES

On-Site: Myers Park Baseball Concession Stand
January 8, 6-7:30pm

Drop Off: Thru Wednesday, January 9, 2019

Myers Park Offices
912 Myers Park Dr

Elite Sporting Goods
1854 Thomasville Rd

SEASON DATES

January - May 2019

COST

\$100 (must be paid at registration)
Hat, shirt, & belt will be provided.

WHO

11 & 12 year olds
Players cannot turn 13 before May 1, 2019.
For players who reside in Tallahassee/Leon County

TRYOUTS

January 12, Time TBA
Tryout results will be posted January 13, 2019
NOTE: All players must tryout for the league

WHAT TO BRING

Birth Certificate
All Players should bring proper baseball equipment including catchers gear

If additional information is required, contact the Myers Park President, Brent Sims at bsims@asilighting.com
League sponsored by: PRNA and Council of League Presidents of Tallahassee

PLAYER'S NAME _____ AGE _____ BIRTHDATE _____

SHIRT SIZE _____ FIELD POSITION _____

OTHER SPRING COMMITMENTS _____

MEDICAL CONDITIONS _____

PARENT NAME _____ • PARENT NAME _____

ADDRESS/ZIP _____ • ADDRESS/ZIP _____

PHONE _____ TXT # _____ • PHONE _____ TXT # _____

EMAIL _____ • EMAIL _____

ARE YOU INTERESTED IN BEING A: HEAD COACH _____ ASSISTANT COACH _____

RESIDENCY: CITY _____ COUNTY _____ OTHER _____

By my signature below, I understand that participation in sports may cause injuries. I agree by my signature below that in the event my child is disabled, injured or incurs a disease of temporary or permanent nature that I will waive all claims or liabilities against the City of Tallahassee, City of Tallahassee Parks, Recreation & Neighborhood Affairs Department (PRNA), Council of League Presidents of Tallahassee (COLP), and Volunteer Park Associations. I hereby certify and take full responsibility that my child's age and address as shown above are correct and meets the requirement of league and zone rules indicated on this registration form. PRNA reserves the right to photograph/video facilities, activities, and program participants for potential future use. All photos/video will remain the property of PRNA and may be used for publicity or promotion purposes only.

PARK USE ONLY	
TEAM:	_____
AMT PD:	_____
CHK#	_____

SIGNATURE _____ **DATE** _____